

NATIONAL PERSONNEL RECORDS CENTER (NPRC)
REQUEST FOR VERIFICATION OF MILITARY SERVICE

To: Eligibility@cem.va.gov (National Cemetery Scheduling Office)	From:
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As much information as possible below must be completed by the originating cemetery prior to submitting to the National Cemetery Scheduling Office (Eligibility) at the above email address:

Date and time of Request	
Point of Contact	
Phone Number	
Who is being interred? Veteran/Dependent*	
Has interment been scheduled? Yes/No	
If scheduled, provide date and time	
Has SHARES/BIRLS/IBBA been checked? Yes/No	
If claim folder exists, enter the claim number	
If claim folder exists, enter the location of folder (Example: 376 RMC or 059, etc)	
	Provided copies of any documentation submitted -
	For burial of dependent – need the full name, ssn, date of birth and date of death in space above

VETERAN INFORMATION

Last Name	
First Name	
Middle Name (Full Middle Name)	
Suffix (Jr., Sr., etc)	
Other Names Used	
Social Security Number	
Date of Birth	
Place of Birth	
Date of Death	
Sex (Male/Female)	
Race	

MILITARY DATA

	1st Period	2nd Period
Branch of Service		
Service Number		
Date of Entry		
Date of Discharge		
Officer or Enlisted		